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ABSTRACT

This resource is intended to aid in the development of competency-based instructional materials for the health education program in Virginia. This resource is divided into four sections. Section I provides specific information concerning the nature of health occupations and references to sources listing places of employment, training, qualifications, employment outlook, working conditions, and salary. Section II contains information about the role of student organizations in vocational education and about the activities of the Health Occupations Students of America. Several sample classroom management and delivery systems are described in section III; these field-tested systems are intended to assist the teacher in using competency-based materials in the classroom. Section IV describes sample class and individual recording systems. Procedures for using the competency profiles are included. (KC)

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ED301644

HEALTH OCCUPATIONS EDUCATION

SERVICE AREA RESOURCE

Commonwealth of Virginia
Department of Education
Vocational and Adult Education
Richmond, Virginia 23216

CE050911

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1984

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COMPETENCY-BASED CBE EDUCATION

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HEALTH OCCUPATIONS EDUCATION

SERVICE AREA RESOURCE

Developed by

Virginia Vocational Curriculum Center
Henrico County Public Schools
Department of Vocational and Community Education
Glen Allen, Virginia 23060

In cooperation with
Health Occupations Education Service
Vocational and Adult Education
Virginia Department of Education
Richmond, Virginia 23216

1984

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FOREWORD

In the next decade, businesses and industries in Virginia will require large numbers of skilled workers. Therefore, vocational education at the secondary and postsecondary levels will have the responsibility of preparing individuals for a variety of occupations.

Competency-based education (CBE) provides the preparation students need for entry into the Virginia work force. The CBE practice of recording competencies developed by students helps them to make a smooth transition between secondary and postsecondary programs when both levels of education are required for career training. In addition, CBE is effective in retraining workers who have been displaced because of changing technology.

This resource will assist teachers and administrators in developing instructional materials that meet the needs of students and industry and comply with the Virginia CBE standards for vocational and adult education.

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The preparation and design of this resource and other original material are the products of the Virginia Vocational Curriculum Center, administered by the Henrico County Public Schools, Department of Vocational and Community Education:

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CONTENTS

INTRODUCTION

CBE Standards and Requirements 1
Purpose 2
Organization 2
Terminology 4
How to Use the Service Area Resource and Task Analyses 7

SECTION I. OCCUPATIONAL INFORMATION

Introduction 11
Using DOT Descriptions for Occupational Information 11
Using Virginia VIEW for Occupational Information 29

SECTION II. STUDENT ORGANIZATIONS

Introduction 33
Competency Development through HOSA 34

SECTION III. CLASSROOM MANAGEMENT SYSTEMS

Introduction 39
Lesson Plans 41
    Lesson Plan Components 42
    Sample Lesson Plan 45
    Blank Lesson Plan Form 47
Student Task Sheets 49
    Sample Student Task Sheet 51
    Blank Student Task Sheet Form 53
Learning Contracts 55
Self-Contained Learning Systems 59

SECTION IV. RECORDING SYSTEMS

Introduction 63
Grading 63
Characteristics of Grading Systems for CBE 64
Psychomotor Grading 65
Grading System Including Affective, Cognitive, and
    Psychomotor Abilities 67
Characteristics of Recording Systems for CBE 67
Individual Student Record Forms 68
Class Progress Record Forms 79

Bibliography 83

INTRODUCTION

This service area resource for Health Occupations Education has been developed as part of a statewide effort to implement competency-based education (CBE) in state vocational programs. The development of this resource and the total implementation effort are based on the 1978-79 Virginia State Plan for Vocational Education which contains the following objectives:

> By June 30, 1982, each school division shall have implemented competency-based instruction in approved vocational education programs based on V-TECS and IDECC catalogues, if available, or other competency-based materials as reported in the annual Local Evaluation Programs, and each community college shall have implemented competency-based instruction in at least one program based on V-TECS materials as reported by the Virginia Community College System.

Although 1982 is designated in the above objective, the date has been extended and full implementation of competency-based education now is planned for 1984.

In addition to this state plan objective and previous efforts by state educators to implement CBE, the Virginia Department of Education has adopted the following CBE standards and requirements for vocational programs:

Standard I. ROLE-RELEVANT COMPETENCIES ARE IDENTIFIED AND STATED.

Requires:
A. A validated task/competency list for each vocational program
B. A performance objective for each validated task/competency.

Standard II. COMPETENCIES ARE SPECIFIED TO STUDENTS PRIOR TO INSTRUCTION.

Requires: A system for providing task/competency information to students prior to instruction.

Standard III. CRITERION-REFERENCED MEASURES ARE USED TO MEASURE ACHIEVEMENT OF COMPETENCIES.

Requires:

A. A criterion-referenced measure for each validated task/competency

B. A testing and evaluation procedure which tests the performance objective and is criterion-based.

Standard IV. A SYSTEM EXISTS FOR DOCUMENTING THE COMPETENCIES ACHIEVED BY EACH STUDENT.

Requires: A system that has task/competency records/profiles for student achievement in each vocational program, course, or unit.

The materials in this service area resource are designed to complement the task analyses for specific health occupations courses in order to comply with the state CBE standards and requirements for vocational and adult programs.

PURPOSE

The primary purpose of this resource is to assist the teacher and curriculum specialist in developing instructional materials which are competency-based and meet CBE standards and requirements for vocational and adult programs. It may be used to update vocational programs currently being offered. The materials contained in this resource are designed for planning by instructional personnel, rather than for direct use by the students.

ORGANIZATION

This resource is divided into the following sections:

I. Occupational Information

Specific information concerning the occupational nature of the work and references to sources listing place of employment, training, qualifications, employment outlook, working conditions, and salary are provided in this section. The information is useful for preparing instructional activities and for counseling students.

II. Student Organizations

Information about the role of student organizations in vocational education and about the specific activities of HOSA (Health Occupations Students of America) is provided in Section II.

III. Classroom Management Systems

Several sample classroom management and delivery systems have been included in this section. The systems have been field-tested and are intended to assist the teacher in using competency-based materials in the classroom and laboratory/shop.

IV. Recording Systems

Recordkeeping systems have been developed to assist the teacher in documenting successful student achievement of competencies. This section contains sample class and individual recording systems.

A task analyses package is available for each course in Health Occupations Education. Each package contains the following information:

Section 1. Task Inventory

This section contains a listing of validated task/competency statements for incumbent workers. Included are program and course titles, performance and enabling objectives, criterion-referenced measures, and suggested instructional activities and aids related to tasks. The task list is arranged by duty area only. No attempt has been made to sequence the tasks in this section of the package.

Section 2. Programs and Courses

This section contains a description of the Health Occupations Education program and a description, task sequence list, and outline for the specific course.

When the task analyses package is used in combination with the relevant occupational information in Section I and the material in Sections II, III, and IV of the service area resource, a complete instructional resource guide is available for implementing competency-based education in the given health occupations course.

TERMINOLOGY

ARTICULATION: A planned process within an educational system that coordinates instructional programs, enabling students to move from one instructional level to another or from one institution to another at the same instructional level without unnecessary duplication or gaps in the instructional program.

CHECKLIST: A list of activities or behaviors that are checked by a student, teacher, or observer as being completed during a particular observation session; frequently used to assess student performance in the psychomotor and affective domains of learning.

COMPETENCY: Demonstrated ability (including knowledge, skills, or attitudes) to perform a specific task successfully in order to meet a specified standard.

COMPETENCY-BASED EDUCATION (CBE): Educational programs in which required knowledge, skills, and attitudes are based on role-relevant competencies.

COMPETENCY-BASED EDUCATION STANDARDS: Standards for CBE in Virginia: (1) role-relevant competencies are identified and stated; (2) competencies are specified to students prior to instruction; (3) criterion-referenced measures are used to assess achievement of competencies; and (4) a system exists for documenting the competencies achieved by each student.

COMPETENCY RECORD/PROFILE: A document that provides specific information concerning student achievement of competencies in CBE courses or programs, including the following information: student name, program title, listing of all terminal competencies, enabling competencies (if required), rating scale, and method for authenticating the record.

CONCEPT/CONTENT AREA: A distinct group of tasks which are related to each other by the nature of the activity to be performed.

CRITERION (criteria): The standard(s) required for a student to reach mastery of an objective.

CRITERION-REFERENCED MEASURE (CRM): A test, test item, or a statement which describes how a student will be tested and/or evaluated. The CRM is based on the task/competency standard or criterion, as illustrated in the following examples:

- Psychomotor

  Give mouth-to-nose resuscitation to a simulated patient who has a serious injury, maintaining a rate of one ventilation every five seconds.

- Cognitive

  Identify and outline the procedures with 100% accuracy for emergency care of complete airway obstruction for a conscious victim, sitting or standing.

- Affective

  Exhibit positive attitudes in the vocational classroom and laboratory. Attitudes will be evaluated by the Program Attitude Checklist.

CRITERION-REFERENCED TESTING: A process of testing which yields measurements that are directly interpretable in terms of specified performance standards. An individual's performance is compared to a criterion, the criterion being the work or performance standard. Therefore, criterion-referenced testing is based on absolute standards stemming from the competency, rather than relative standards, such as class standing (also called criterion-referenced evaluation, objective-referenced testing, proficiency testing, or domain-referenced testing).

CURRICULUM: Objectives, content, and learning activities arranged in a learning sequence for a particular instructional area. An orderly arrangement of integrated topics, activities, and experiences which students pursue for the attainment of a specified educational goal.

DUTY AREA: A major segment of the work involved in an occupation; composed of a group of tasks which are related to each other by the nature of the work to be performed.

ENABLING OBJECTIVE: A sub-goal that identifies one thing a learner must be able to know or to do to complete the performance objective.

ENTRY-LEVEL SKILLS: The set of competencies required of a beginning worker in an occupation for immediate productivity upon entering that occupation.

JOB/OCCUPATION: The composite of duties and tasks performed regularly in one's trade, occupation, or profession.

INSTRUCTIONAL ACTIVITIES: Educational activities completed by the students to learn specific competencies (also called learning strategies).

INSTRUCTIONAL RESOURCE GUIDE: One or more documents including detailed information for developing competency-based courses and programs. The guide(s) include information concerning the occupational or program domain, task list, performance and enabling objectives, criterion-referenced measures, learning activities, tools/materials, references, program and course descriptions, course content outlines, classroom management systems, student recording systems, and additional resources.

OCCUPATIONAL DOMAIN: A group or listing of occupations within a vocational area that share common experiences, knowledge, and skill requirements, such as manufacturing occupations and construction occupations.

PERFORMANCE: A clear statement of what the learner will be able to do after mastery status has been achieved.

PERFORMANCE OBJECTIVE: A statement in precise measurable terms of a particular behavior to be exhibited by a learner under specified conditions. It possesses each of the elements or characteristics specified as follows:

a. Condition--The performance situation confronting the learner is clearly specified. This specification includes equipment provided or withheld and environmental constraints such as temperature and space.

b. Performance--The specific behavior expected of the learner is stated.

c. Standard (criterion)--The degree of acceptable performance is specified. This may be quantitative, qualitative, or both. If quantitative, 100% proficiency is assumed unless otherwise stated. In the standard, ". . . list procedure for immobilizing diving accident victim," it is assumed that all procedures must be listed, compared to, "list five of seven procedures known for immobilizing diving accident victim." If qualitative, the standard is explicitly stated, e.g., ". . . apply dressings and bandages to eyes of patient so that no light can penetrate dark patches and bandages."

STANDARD: That part of a performance objective or criterion-referenced measure which describes how well or to what proficiency level a task must be performed (also called performance level, criterion, or work standard).

TASK: A unit of work activity or operation that constitutes a logical and necessary step in the performance of a duty. For example:

Job/Occupation	Duty	Task
Emergency Medical Technician-A	Treating open and closed wounds	Apply dressing and bandage to wound on forehead or scalp

TASK ANALYSIS: An organized method for identifying roles, responsibilities, and jobs performed by workers in an occupation or for identifying content in nonoccupational courses. Task analyses are used in CBE to establish instructional content and scope.

TASK LIST: A list of tasks performed by workers in an occupational domain (also called job inventory) or what is required to be taught in a nonoccupational course (industrial arts, general business, exploratory, etc.).

VALIDATION: A procedure used to determine and verify if tasks/competencies identified for a vocational program are valid.

HOW TO USE THE SERVICE AREA RESOURCE AND TASK ANALYSES

This resource, when supplemented by separate task analyses, provides the occupational and related information needed to implement CBE programs in a systematic manner.

The following steps should be followed when using these materials to implement CBE in a vocational program or course:

Using the Resource

1. Review occupational information. Section I contains detailed information concerning the occupational domain, which may be used to give students a general overview of the career opportunities in the field of health occupations. When setting up a specific program or course, study the guide application chart located on the inside front cover of the separate task analyses guide to determine whether the guide includes the occupational titles and courses appropriate for the local setting. Extract the needed occupational information from Section I.

Using the Separate Task Analyses Package

2. Review tasks. Review the task inventory in Section 1 to determine whether all task/competencies are included for the region or locality in which the program or course is offered. If additional task/competencies are required for the program/course, include them in the instructional program.

3. Review outlines and sequence competencies. In Section 2, review the task sequence listing and content outline referenced to the task inventory in Section 1. Revise the course outlines if additional task/competencies have been identified or if the sequencing needs to be changed.

4. Develop criterion-referenced measures. Construct criterion-referenced tests and assessment materials, using the criterion-referenced measures provided on the task analysis sheets in Section 1; contruct criterion-referenced measures and tests for all additional competencies identified by the teacher.

5. Develop instructional materials. Develop or select instructional materials such as student handouts, learning packages, modules, or lab exercise sheets. Review instructional materials currently being used to determine compatibility with the competencies identified for the program/course. Resources for the suggested learning activities are included on the task inventory sheets in Section 1.

Using the Resource

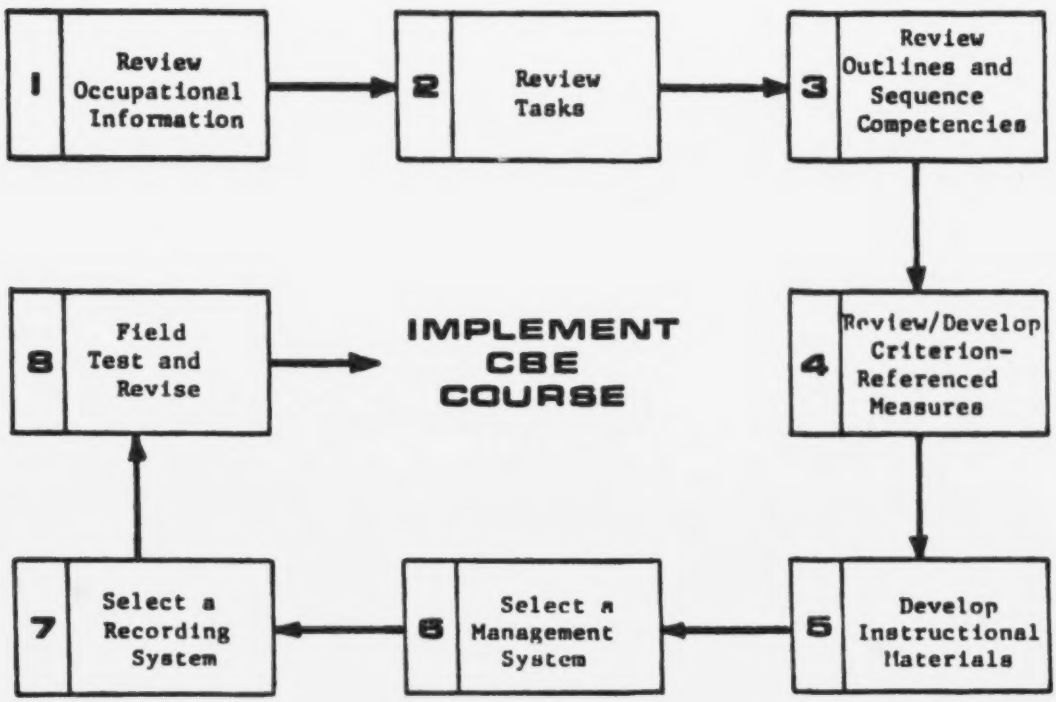
6. Select a management system. Select a classroom management or delivery system from Section III. Modification may be necessary to meet individual requirements. Information on HOSA (Health Occupations Students of America) student organization is contained in Section II for ease of integration into classroom activities.

7. Select a recording system. Design or select a student recording system from Section IV. The decision to select a particular recording system will depend on program requirements and local administrative procedures. Various sample system designs have been included in this resource.

Field Testing

8. Field test and revise instructional materials. This is the final step prior to the implementation of CBE in a vocational program.

The use of the service area resource and the specific task analyses for implementing CBE in a vocational program or course is illustrated by the following diagram:



The preceding procedure for implementation of competency-based education in Health Occupations programs and courses may be modified to meet local program requirements and needs. Materials and information in addition to those included in the service area resource and task analyses packages may be necessary or desired. Further information concerning the implementation of competency-based education (CBE) is provided in the Guide for Implementing Competency-Based Education in Vocational Programs, Virginia Department of Education.

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[1]Ralph A. Horne, Guide for Implementing Competency-Based Education in Vocational Programs, Field Review Draft (Richmond: Virginia Department of Education, 1981).

SECTION I.

OCCUPATIONAL INFORMATION

This section, consisting of two parts, provides information for teachers and counselors to use when presenting career information to students. First, descriptions of tasks performed by workers in selected nationally researched jobs in health occupations have been compiled from the Dictionary of Occupational Titles[2] (DOT). Second, user information on the Virginia Vital Information Education Workshops (VIEW) Microfiche Deck, which concentrates its career information on those jobs most in demand in Virginia, is described.

It may be helpful to duplicate occupational information for students to use in making comparisons within a selected field of study. This material may be useful also in preparatory courses to aid in course selection and goal setting.

USING DOT PAGES TO OBTAIN OCCUPATIONAL INFORMATION

Occupational information gathered from the DOT is organized alphabetically and includes the following:

Central-Supply Worker
Electrocardiograph Technician
Emergency Medical Technician
Licensed Practical Nurse
Medical Assistant
Medical-Laboratory Assistant
Medical-Laboratory Technician
Occupational Therapy Aide
Physical Therapy Aide
Psychiatric Aide
Supervisor, Central Supply
Surgical Technician

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[2]U.S. Department of Labor, Employment and Training Administration, Dictionary of Occupational Titles (4th ed.; Washington, D.C.: U.S. Government Printing Office, 1977).

Career information can be studied for comparisons of such factors as earnings, training needed, and occupational growth, and the Occupational Outlook Handbook[3] is an example of a resource providing this type of information. Categories of occupational information available in this and similar resources may be identified as follows:

PLACES OF EMPLOYMENT: Includes the number of workers in a given occupation; a listing of the places with a description of numbers (most, many, some) of the places of employment; the areas of concentration, geographically or industrially; and the number of self-employed persons.

WORKING CONDITIONS: Lists the conditions common to different occupations, overtime work, environment, hazards, and outdoor/indoor occupations.

PREPARATION/TRAINING: Identifies the types of training required or preferred and where such training is available. (Note: Entry-level jobs are most often found in office and service clusters, but some are found in sales, mechanical, and industrial clusters. The level at which a person enters an occupation and the speed at which the person advances frequently are determined by the amount of training completed by the individual.)

OTHER QUALIFICATIONS: Includes physical requirements, personality traits, aptitudes, and attitudes.

ADVANCEMENT: Summarizes the possibilities that exist with and without additional training; career ladder progression; patterns of movement from one occupation to another, if available; occupations which require little or no previous work experience; opportunities to transfer to other work of a similar nature; and licensing or certification requirements. (Note: Occupational skills gained in one job can make the worker more employable in another--perhaps a job that is more desirable in terms of earnings, working conditions, or scope for self-expression.)

WORKER FUNCTIONS/RELATIONSHIPS: Refers to the middle three digits in the DOT Code, which rate the worker functions entailed in the particular job. (Note: The higher the number assigned, the less complex the function; conversely, the lower the number assigned, the more complex the level of responsibility and judgment required.)

SPECIALIZED TITLES: Refers to those that require similar aptitudes, interests, and education or training.

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[3]U.S., Department of Labor, Bureau of Labor Statistics, Occupational Outlook Handbook (1980-81 ed.; Washington: U.S. Government Printing Office, 1980).

RELATED OCCUPATIONS: Refers to those that require similar aptitudes, interests, and education or training.

NATURE OF THE WORK: Describes the major duties of workers in the occupation or industry; what the workers do on the job; what tools and equipment they use; and how they do their work.

a. Lead Statement--Summarizes the entire occupation; the first sentence following the industry designation and alternate titles, if any.

b. Task Element Statements--Indicates the specific tasks the worker performs to accomplish the overall job purpose described in the lead statement.

c. May Items--Describes the duties required of workers in some establishments but not in others. (Note: The lead statements and the task element statements are included in this presentation.)

EMPLOYMENT OUTLOOK: Presents data as follows:

PROJECTED 1978-90 CHANGE IN EMPLOYMENT REQUIREMENTS

____ Much faster than average	50.0 percent or more
____ Faster than average	25.0 to 49.9 percent
____ About as fast as average	15.0 to 24.9 percent
____ More slowly than average	5.0 to 14.9 percent
____ Little change	4.9 to -4.9 percent
____ Decline	-5.0 percent or more

Openings due to: ____ Annual replacements
____ Growth of industry

EARNINGS: Includes items such as salary/wages, overtime, night shift, irregular hours, tips, and differences in earnings within given occupations. (Note: Generally, earnings are compared to the average earnings of workers in private industry who are not supervisors and not in farming. This group represented about 60 percent of all workers in 1978. Salaries may vary according to geographic location, type of industry, and type of work performed.)

BENEFITS: Contains an overall listing of benefits available; however, advantages not listed also may be available.

Occupational information is presented on the following pages in relation to the categories described. For further information, write:

Executive Director of VOICC
(Virginia Occupational Information Coordinating Committee)
Virginia Employment Commission
P. O. Box 1358
Richmond, Virginia 23211

CENTRAL-SUPPLY WORKER

DOT 381 687 010

CLEANS STERILIZES AND ASSEMBLES hospital equipment, supplies, and instruments according to prescribed procedures and techniques, performing any combination of following tasks:

SCRUBS AND WASHES surgical instruments, containers, syringes, and equipment such as aspirators, croupettes, and oxygen suppliers.

STERILIZES instruments, equipment, surgical linens, and supplies such as surgical packs, treatment trays, and syringes, using autoclave, water sterilizer, or antiseptic solutions.

PREPARES packs of supplies and instruments and dressing and treatment trays, according to designated lists or codes, and

WRAPS LABELS AND SEALS packs.

SHARPENS hypodermic needles, using hone or abrasive wheel,

AND MATCHES syringe barrels and plungers, according to size, trade names, or serial number.

STORES prepared articles and supplies in designated areas.

May
FILL requisitions,
WRITE charges, and
INVENTORY supplies.

May
PREPARE solutions according to prescribed formula.

May be assigned to
WORK in such hospital rooms as surgery and delivery rooms.

May be required to hold practical nurse license.

ELECTROCARDIOGRAPH TECHNICIAN

DOT 078 362 018

RECORDS electromotive variations in action of heart muscle,
USING electrocardiograph machine, to
PROVIDE data for diagnosis of heart ailments:

ATTACHES electrodes to specified areas of patient's body.

TURNS selector switch, and
MOVES chest electrode to successive positions across chest to
RECORD electromotive variations occurring in various areas of heart muscle.

PRESSES button to mark tracing paper to
INDICATE positions of chest electrodes.

REPLENISHES supply of paper and ink in machine and
REPORTS malfunctions.

EDITS
AND
MOUNTS final results and
FORWARDS results to Cardiologist for analysis and interpretation.

EMERGENCY MEDICAL TECHNICIAN

DOT 079 374 010

ADMINISTERS / **TRANSPORTS** / **WORKING** first-aid treatment to and sick or injured person to medical facility, as a member of emergency medical team:

RESPONDS to instructions from emergency medical dispatcher and

DRIVES specially equipped emergency vehicle to specified location.

MONITORS / **MAINTAIN** communication equipment to contact with dispatcher.

REMOVES / **OR** / **ASSISTS** in removal of victims from scene of accident or catastrophe.

DETERMINES nature and extent of illness or injury, to

ESTABLISH first aid procedures to be followed or need for additional assistance, basing decisions on statements of persons involved, examination of victim or victims, and knowledge of emergency medical practice.

ADMINISTERS prescribed first-aid treatment at site of emergency or in specially equipped vehicle, such as

APPLYING splints,

ADMINISTERING oxygen or intravenous injections,

TREATING minor wounds or abrasions, or

ADMINISTERING artificial resuscitation.

COMMUNICATES with professional medical personnel at emergency treatment facility to

OBTAIN instructions regarding further treatment and to

ARRANGE for reception of victims at treatment facility.

(continued)

EMERGENCY MEDICAL TECHNICIAN

(continued)

ASSISTS REMOVING TRANSFERRING	in victims from vehicle and victims to treatment center.
ASSISTS OBTAIN AND RECORD	treatment center admitting personnel to information related to victims' vital statistics and circumstances of emergency.
MAINTAINS REPLENISHES	vehicles and medical and communication equipment and first-aid equipment and supplies.

LICENSED PRACTICAL NURSE

DOT 079 374 014

CARES FOR **ill, injured, convalescent, and handicapped persons in hospitals, clinics, private homes, sanitariums, and similar institutions:**

TAKES AND RECORDS temperature, blood pressure, and pulse and respiration rate.

DRESSES GIVES wounds, enemas, douches, alcohol rubs, and massages.

APPLIES compresses, ice bags, and hot water bottles.

OBSERVES REPORTS patients and adverse reactions to medical personnel in charge.

ADMINISTERS NOTES specified medication, and time and amount on patients' charts.

ASSEMBLES AND USES such equipment as catheters, tracheotomy tubes, and oxygen suppliers.

PERFORMS routine laboratory work, such as urinalysis.

STERILIZES USING equipment and supplies, germicides, sterilizer, or autoclave.

PREPARES FEEDS food trays and patients.

RECORDS food and fluid intake and output.

BATHES DRESSES AND ASSISTS patients in walking and turning.

continued

LICENSED PRACTICAL NURSE

CLEANS rooms,
MAKES beds, and
ANSWERS patients' calls.

WASHES AND DRESSES bodies of deceased persons.

MUST PASS state board examination and be licensed.

MEDICAL ASSISTANT

DOT 079 367 010

PERFORMS following duties under direction of physician in examination and treatment of patients:

PREPARES treatment rooms for examination of patient.

DRAPES POSITIONS patients with covering and instruments and equipment.

HANDS instruments and materials to doctor as directed.

STERILIZES AND CLEANS instruments.

PREPARES DETERMINE inventory of supplies to items to be replenished.

INTERVIEWS CHECKS patients and pulse, temperature, blood pressure, weight, and height.

May
OPERATE equipment,
GIVE injections or treatments, and
ASSIST in laboratory.

May
SCHEDULE appointments,
RECEIVE money for bills,
KEEP X-ray and other medical records,
PERFORM secretarial tasks,
COMPLETE insurance forms, and
MAINTAIN financial records.

MEDICAL-LABORATORY ASSISTANT

DOT 078 381 010

PERFORMS routine tests in medical laboratory under supervision of Medical Technologist or other qualified individual:

USES prescribed procedures in urinalysis, hematology, serology, and bacteriology.

May
PERFORM routine tests in chemistry.

MEDICAL-LABORATORY TECHNICIAN

DOT 078 381 014

PERFORMS routine tests in medical laboratory for use in treatment and diagnosis of disease:

PREPARES tissue samples for Pathologist.

TAKES blood samples.

EXECUTES such laboratory tests as urinalysis and blood counts.

MAKES quantitative and qualitative chemical and biological analyses of body specimens, under supervision of Medical Technologist or Laboratory Director.

OCCUPATIONAL THERAPY AIDE

DOT 355 377 010

ASSISTS Occupational Therapist or Occupational Therapy Assistant in occupational therapy program in hospital or similar institution:

PERFORMS / **TRANSPORTING** / **ASSEMBLING** / **AND** / **PREPARING** / **AND** / **MAINTAINING** program support services, such as patient, equipment, work areas, as directed.

ASSISTS in maintaining supplies and equipment.

May **ASSIST** in selected aspects of patient services as assigned.

PHYSICAL THERAPY AIDE

DOT 355 354 010

ASSISTS Physical Therapist or Physical Therapist Assistant during administration of treatments, tests, and evaluations of patients:

PREPARES patients for physical therapy treatments.

ASSISTS patients in dressing, undressing, and putting on and removing assistive and supportive devices, such as braces, splints, and slings, prior to and after treatments.

SECURES patients into or onto therapy equipment.

SUPPORTS TURNS AND STABILIZES patients to assist Physical Therapist or Physical Therapist Assistant in administering treatments.

ADMINISTERS routine treatments, such as hydrotherapy, hot and cold packs, and paraffin bath.

SAFEGUARDS MOTIVATES AND ASSISTS patients practicing exercises and functional activities.

OBSERVES REPORTS patients during treatments and sign of fatigue, distress, or other problems.

TRANSPORTS TRANSFERS patients to and from treatment area and patients between conveyances and treatment equipment,

USING transfer techniques appropriate to patients' conditions.

CHANGES ARRANGES linens and treatment supplies and equipment according to standard procedure or written or oral instructions.

CLEANS work area and equipment after treatment.

(continued)

PHYSICAL THERAPY AIDE

(continued)

PERFORMS hydrotherapy equipment at appropriate temperature, and
ADDS disinfectant solutions.

PERFORMS miscellaneous clerical and related duties, such as
ANSWERING telephone,
TAKING messages,
RUNNING errands,
DELIVERING messages, and
FILING patient records.

May
RECORD treatment given and equipment used,
INVENTORY and
REQUISITION supplies and equipment, and
ADJUST fit of supportive and assistive devices for patients, as instructed.

May
ASSIST in a specific type of treatment or patient service, as assigned.

PSYCHIATRIC AIDE

DOT 355 377 014

ASSISTS mentally ill patients,
WORKING under direction of nursing and medical staff:

ACCOMPANIES patients to shower room and
ASSISTS them in bathing, dressing, and grooming.

ACCOMPANIES patients to and from wards for examination and treatment, and
ADMINISTERS prescribed medications.

ASSISTS patients in becoming accustomed to hospital routine, and
ENCOURAGES them to participate in social and recreational activities, such as visits, sports, and dramatics, to promote rehabilitation.

OBSERVES patients to ensure that none wanders from grounds.

FEEDS patients or
ATTEMPTS to persuade them to eat, and
NOTES reasons for rejection of food.

OBSERVES patients to detect unusual behavior, and
AIDS
OR
RESTRAINS them to prevent injury to themselves or other patients.

May
ESCORT patients off grounds for medical or dental treatment, to library for selection of reading materials, and to church services, motion pictures, or athletic events.

May
CLEAN rooms, ward furnishings, walls, and floors, or
CHANGE bed linens.

May
CARE
FOR patients and other services of a single ward and be designated as Ward Supervisor.

SUPERVISOR, CENTRAL SUPPLY

DOT 079 164 010

DIRECTS activities of personnel in hospital central supply room to furnish sterile and nonsterile supplies and equipment for use in care and treatment of patients:

SUPERVISES workers engaged in cleaning, assembling, and packaging of linens, gowns, dressings, gloves, treatment trays, instruments, and related items.

SUPERVISES workers engaged in preparation of solutions, arrangement of stock, and requisitioning, issuing, controlling, and charging of supplies and equipment.

INSTRUCTS personnel in use of sterilizing equipment and water distillation apparatus, in setting up of standardized treatment trays, and in maintenance of equipment in central supply room.

ESTABLISHES standards of work performance and methods of operation for department.

ENSURES that aseptic techniques are employed by personnel in preparing and handling sterile items.

SURGICAL TECHNICIAN

DOT 079 374 022

PERFORMS any combination of following tasks before, during, and after operation:

WASHES
SHAVES
AND
STERILIZES operative area of patient.

[illegible] hands
AND
[illegible] cap, mask, gown, and rubber gloves.

PLACES equipment and supplies in operating room according to surgeon's directions.

ARRANGES instruments as specified by nurse.

AIDS team in donning gowns and gloves.

MAINTAINS specified supply of such fluids as plasma, saline, blood, and glucose for use during operation.

ADJUSTS lights and other equipment as directed.

[illegible]
AND
STERILIZES used equipment,
[illegible] germicides, autoclave, and sterilizer.

[illegible] operating room.

COUNTS sponges, needles, and instruments used during operation.

May
ASSIST in administering blood, plasma, or other injections and transfusions.

May
HAND surgeon instruments and supplies,
HOLD retractors, and
CUT sutures, as directed, during operation.

USING VIRGINIA VIEW TO OBTAIN OCCUPATIONAL INFORMATION

The Virginia Vital Information Education Workshops (VIEW) Microfiche Deck is one part of a career information delivery system sponsored by the Virginia Occupational Information Coordinating Committee to deliver educational and occupational information to citizens of the Commonwealth. Other means of delivering the career information are (1) the Toll-Free Career Information Hotline (1-800-542-5870); (2) publications, including the Dictionary of Licensed Occupations in Virginia, the Dictionary of Apprenticeships Occupations in Virginia, the Forum newsletter, and occupational briefs modified for making transparencies on 25 occupations for classroom use in career counseling and career education; and (3) the computerized delivery system used in conjunction with the microfiche deck.

The Virginia VIEW Career Information System is available at no cost to a variety of users and user agencies, including secondary and middle schools, community colleges, and private and public colleges and universities.

The Virginia VIEW Microfiche Deck contains 70 microfiche. The deck is divided into eight parts: 52 fiche cards containing 345 VIEWSCRIPTS (occupational briefs) arranged alphabetically within seven Data-People-Things Clusters; 4 fiche cards (tan) containing information on postsecondary schools in Virginia, including community colleges, two-year public and private institutions, public colleges and universities, and proprietary schools; 4 fiche cards (white) on financial aid; 1 fiche card (gold) listing additional training and the vocational education directors; 1 fiche card (brown) on apprenticeship program in Virginia; 2 fiche cards (blue) on military training opportunities; 4 fiche cards (light green) containing information on postsecondary school programs; and 1 fiche card (dark green) containing information on secondary school subjects.

Plans are that a microfiche deck will be issued each year, providing updated, current, and accurate information.

The 1982 Virginia VIEW Microfiche Deck presents information on 345 occupational titles and 1,269 related occupational specialties. The occupational titles were selected to represent the occupations in which most Virginians are presently employed, based on data from the Virginia Employment Commission. The microfiche decks are distributed without cost to the user agencies who provide their own readers or reader printers.

A microcomputer system has been developed to be used in conjunction with the microfiche deck. The microcomputer system is based on a Virginia VIEW self-assessment, Career Search, which is designed to assess seven key areas: interests, areas of work, physical strengths, physical capabilities, working conditions, educational levels, and temperaments. The user is able to key the results of the Career Search into a microcomputer which then provides the user with a list of occupations that might be considered. It also directs the user to the appropriate microfiche to obtain information about the selected occupations. There is no charge for the microcomputer software; however, a user must have access to a microcomputer.

Teachers may obtain more information on the access to and the use of the system from their school librarian, their divisional director of vocational education, or the following:

Project Director
Virginia VIEW
Virginia Polytechnic Institute and State University
301 University City Office Building
Blacksburg, Virginia 24061
Phone: (703) 961-7158

The following page contains the access numbers and microfiche codes for various occupational titles found in the Health Occupations Education program. These occupational titles are arranged alphabetically.

MICRO-COMPUTER ACCESS NUMBER	OCCUPATION TITLE	MICROFICHE LOCATION CODE
164	Clinical Laboratory Worker	DT16
165	Dental Assistant	DPT 48
166	Dental Hygienist	DPT48
167	Dental Laboratory Technician	DT18
304	Electrocardiograph Technician	DPT49
305	Electroencephalograph Technician	DPT49
170	Emergency Medical Technician	DPT49
276	Home Health Aide	P3
172	Licensed Practical Nurse	DPT50
174	Nurse Aide/Orderly	PT32
175	Occupational Therapy Personnel	DPT51
177	Physical Therapy Personnel	DPT52
314	Psychiatric Aide/Technician	PT33
316	Surgical Technician	DPT53

SECTION II.

STUDENT ORGANIZATIONS

Each vocational student organization provides opportunities for students to (1) exhibit pride in work; (2) demonstrate competencies related to the world of work; and (3) develop leadership abilities, responsible citizenship, and a realistic self-image. These goals are achieved through activities structured within each vocational program and course. Vocational student organizations provide a means through which students become involved in school and community activities, carry out individual or group projects related to career life goals, and meet with community leaders and employers in a variety of situations. The knowledge, skills, and attitudes developed through these organizations facilitate the students' transition from school to their chosen vocation and to responsible adulthood.

The Vocational Education Amendments of 1976, P.L. 94-482, place emphasis on ensuring that curriculum development activities will have an impact on instruction in vocational education classrooms. Each vocational service has an appropriate vocational student organization operating as an integral part of the instructional program.

On June 23, 1978, the Virginia State Board of Education approved the following policy standards for operation of vocational education programs:

- A local chapter of the appropriate vocational student organization is operating as an integral part of each vocational program field in the school.
- Vocational teachers are serving as advisors to the local chapter or a section of the vocational student organization.
- Participation of students in chapter instructional activities is required regardless of whether they are paid members of the organization.

Competency Development through
Health Occupations Students of America (HOSA)

I. Description of Organization

A. HOSA Membership

The Health Occupations Students of America (HOSA) is a student-centered organization designed specifically for students enrolled in vocational HOE programs offered by local education agencies in conjunction with state departments of education throughout the United States. HOSA is a nonpolitical, nonsectarian, and nonprofit organization.

Any student enrolled in a health occupations course/program in the United States is eligible for membership in HOSA at the local, state, and national levels. At the state level, the local chartered chapters make up a state association of HOSA; in Virginia, the official name is the Virginia Association Health Occupations Students of America (VA HOSA). At the national level, HOSA is composed of chartered state associations. Over 30,000 students belong to National HOSA.

B. HOSA as a Part of the Educational Program

Health Occupations Education (HOE) programs involve much more than instruction in occupational skills. These programs also help students to develop leadership and human relations skills needed for successful functioning as team members, as well as individuals. HOSA provides an opportunity to prepare, plan, and conduct activities that will develop student interests, attitudes, appreciation, and abilities, and enhances that portion of the educational program for health occupations that is devoted mainly to developing leadership and human relations skills. Thus, HOSA is an integral part of the educational program.

HOSA is recognized by the United States Department of Education as an integral part of the total HOE program. HOE students have common objectives and interests in that each is studying for a specific career objective. HOSA activities have a tremendous psychological effect upon the attitudes of students, many of whom have no other opportunity to participate in social activities of the school or to develop responsibilities of leadership. HOSA members learn to serve as leaders and as followers.

C. Purposes of Virginia HOSA

Every HOSA chapter shares six common purposes as identified in Article II of the Bylaws of the Virginia Association, HOSA, which serve as goals for local chapters:

1. To foster programs and activities which will develop the following:
   a. Physical, mental, and social well-being of the individual
   b. Leadership, character, and citizenship
   c. Ethical practices and respect for the dignity of work
2. To foster self-actualization of each member, which will contribute to meeting the individual's psychological, social, and economic needs
3. To build the confidence of students in themselves and their work through learning to assume responsibilities, which promotes the following benefits:
   a. Development of personal and occupational competencies and skills
   b. Realistic career choices
   c. Pursuit of successful employment in the field of health
4. To promote interorganizational relationships with professional groups, businesses, industries, and other student organizations
5. To recognize individual achievement in scholarship, leadership skills, or services rendered by providing awards
6. To promote involvement in current health-care issues, environmental concerns, and survival needs of the community, the nation, and the world.

II. Class/HOSA Coordination

A. The Benefits of Coordination

A strong motivating force for the health occupations instructor is found in knowing that the HOSA program of activities can be a source of inspiration, motivation, fun, and fulfillment for students. Using HOSA as an integral part of ongoing HOE courses helps the teacher to complement, strengthen, and supplement the total instructional program. When combined with classroom instruction, laboratory practice, and clinical experience, HOSA gives greater scope, depth, and meaning to a student's learning experiences. Success as a member of the health team depends upon attitudes that lend themselves to both personal and leadership development within an education-oriented, student-centered program.

B. Suggested Areas for Coordinated Activities

1. Leadership Skill Development

Participation and learning by doing are keys to HOSA leadership programs. Development of leadership skills takes study, practice, and trial and error. Activities in this area should provide opportunities for members to practice leadership skills.

Examples:

a. Public speaking workshop for HOSA members
b. Parliamentary procedure contest between HOSA members and members of other student organizations
c. Installation of officers of a new HOSA chapter

2. Use of Community Health Resources

Activities which use the health occupations community to enhance student understanding of health-related industry and technology and awareness of personal interests and talents are those which could be categorized under this major area. Opportunities should be provided which bring students and the health occupations community together.

Examples:

a. Field trip to a health-related facility
b. Speaker from the health-related field as a program for chapter meeting

3. Involvement in Community Service

Opportunities for citizenship development among members should be provided through community service activities. Promotion of positive attitudes concerning service to the community should be an outgrowth of involvement and participation in these activities.

Examples:

a. Blood pressure screening clinic in local shopping mall
b. Holiday party at local nursing home
c. Health carnival

4. Participation in School Service

Opportunities for the development of positive attitudes toward service to others should be provided through activities conducted under this category.

Examples:

a. Health-topic handouts to be distributed in school
b. Eye-screening clinic in local schools

5. Public Relations Skills

The public should be aware of HOSA and the activities in which students who are members are engaged. The organization must be advertised and publicized. Activities in this category should center around the use of the media to tell the HOSA story.

Examples:

a. Appearance of several students and their advisors on local TV talk show
b. Maintenance of a HOSA bulletin board in school
c. Maintenance of a HOSA news column in the school newspaper

6. Social-Recreational Skills

Social skills are developed by association with others. Recreational activities provide members with opportunities to associate with others, develop social skills, and experience fruitful use of leisure time.

Examples:

a. Provision of refreshments after each chapter meeting
b. Sponsorship of Valentine dance for all members of vocational student organizations in the school

7. Student Achievement and Recognition

Recognition of the participation and achievement of students engaged in health occupations education and activities not only positively reinforces student efforts and an individual sense of self-worth, but also ultimately develops incentives for additional achievement and pride in work well done. Activities in this category should serve as vehicles by which student application of acquired knowledges, skills, and attitudes are made visible to others and recognized for excellence.

Examples:

a. Public speaking contest among HOSA members with awards given for participation and achievement
b. Presentation of award certificates at the end of each grading period to those HOSA memers who raised their overall grade-point average by five-tenths (.5) of a point

8. Student Competition

Virginia HOSA conducts contests on the local and state levels in which students demonstrate leadership skills they are learning. The annual Virginia HOSA Conference is the state-level competition in which students compete in leadership skill areas. First-place and second-place winners are entitled to represent the Commonwealth at the national conference.

9. Planning and Fund-Raising

Planning and participating in fund-raising activities provide the financial means to carry out other projects. Policies and procedures of the local school division, as well as community restrictions or guidelines, govern the type of enterprising activities that any school organization may undertake. The advisor and members should ensure that activities undertaken are of a constructive nature.

III. Other Programs, Publications, and Applications of HOSA to Competency-Based Education

The HOSA advisor should become familiar with certain HOSA resources and materials which will serve as aids in the classroom. The advisor's own professional library should include the following:

Simplified Parliamentary Procedure. Ann D. Austin, R.N., and Mary R. Lewallen, R.N.

Roberts' Rules of Order Newly Revised. General Henry M. Roberts.

Virginia HOSA Advisor's Manual.

Information concerning ordering the resource materials is available from:

Virginia Association of HOSA
P. O. Box 6Q
Richmond, Virginia 23216
(804/225-2087)

SECTION III.

CLASSROOM MANAGEMENT SYSTEMS

If students in Health Occupations Education programs and courses are to be provided with the instruction necessary for entry into an advanced vocational program, then a systematic method of instruction must be used. In addition, the inclusion of the following unique requirements in competency-based education demands a higher degree of organization than may have been incorporated in traditional vocational instruction:

1. Validated task/competencies must be included in instruction.
2. Task/competencies must be specified to students prior to instruction.
3. Criterion-referenced measures must be administered to evaluate the student's mastery of each validated task/competency.
4. A system must exist for recording student achievement in regard to each validated task/competency.

The following questions should be considered during the establishment of classroom management (or instructional delivery) systems for competency-based instruction in Health Occupations Education programs and courses:

1. How and when will students be informed of course or unit objectives and requirements?
2. How will instructional content and activities be sequenced in the course?
3. Will students learn in an independent or group setting?
4. Will a variety of instructional methods and strategies be used?
5. How will laboratory and lecture activities be integrated?
6. How will slow and fast learners be accommodated?
7. How will HOSA activities be integrated into instruction?
8. What will be the methods and intervals of student evaluation?

9. How and when will student achievement be documented on the competency record?

10. How will students who transfer from another school or program be placed at an appropriate level in the program?

The purpose of this section is to illustrate several samples of classroom management systems developed by teachers incorporating competency-based vocational education techniques into their courses and programs. The systems have been field tested and revised for use in laboratories and classrooms in Virginia.

The following classroom management systems are discussed in this section:

Lesson Plans
Student Task Sheets
Learning Contracts
Self-Contained Learning Systems

It is important to note that any combination of the above systems may be used by the individual classroom teacher in actual delivery of instruction.

LESSON PLANS

Competency-based education requires that instructional content within vocational education courses be based upon predetermined competencies and objectives. Ensuring the actual achievement of intended course outcomes requires a very high degree of organization in daily planning for instruction. The lesson plan is a most effective tool for organizing and implementing instruction within each class session.

The lesson plan may be viewed as a detailed part of a blueprint for the total course. It ensures that the instructional content for each class session is related to overall course objectives and that content across class sessions is sufficiently inclusive and sequenced so that predetermined course outcomes are, in fact, achieved. Additionally, it ensures effective use of instructional activities and materials in delivering the instructional content of each class session.

Lesson plan format may vary according to teacher preference or local requirements. The lesson plan format included in this section was chosen due to its incorporation of commonly accepted components. In addition, the format corresponds to that of the task/competency framework pages included in the instructional task/competency package developed for each Health Occupations Education course (see Figure 1).

The listing which follows includes a description of the components of the sample lesson plan (Figure 2). Where appropriate, the component is cross-referenced to the corresponding section(s) of Figure 1, and referral to that section in the actual instructional task/competency package for the course provides the teacher with useful information in developing the lesson plan component.

LESSON PLAN COMPONENTS

LESSON TITLE--summarizes the content of the lesson; primarily serves as aid to instructor in readily locating a needed plan that is already developed.

COURSE--identifies course in which lesson plan is to be implemented; may include more than one listing in cases where a given task/competency is identified for inclusion in several courses. (Figure 1, #4)

INSTRUCTIONAL UNIT--refers to a distinct grouping of related task/competencies; Content/concept area may be listed here. (Figure 1, #1)

TASK/COMPETENCY--identifies the knowledge, skills, or attitudes which the learner should possess after the lesson plan is implemented. (Figure 1, #2)

PERFORMANCE OBJECTIVE--states the behavior or performance to be exhibited by the student after instruction, the condition under which the behavior takes place, and the criterion level or standard which the student must meet for task mastery. (Figure 1, #5)

TOOLS/MATERIALS--includes any equipment or supplies that will have to be secured or developed by the instructor in implementing lesson plan activities. (Figure 1, #9)

AUDIOVISUALS--refers to any nonprint materials used in lesson plan activities. (Figure 1, #10)

REFERENCES--includes any printed materials to be used by students in lesson plan activities; may also include resources that are helpful to the instructor in implementing the lesson, but not intended for direct student use. (Figure 1, #11)

STUDENT ASSIGNMENTS--identifies activities the student will complete to reinforce or apply learning. (Figure 1, #6, #8)

PRESENTATION--describes all lesson plan activities, listed in sequence and grouped according to the following types and purposes (Figure 1, #5, #8)

- Introduction--to orient, to motivate, to provide continuity (Teacher should specify task/competency(ies) prior to presentation of lesson.)
- Presentation--to bring student face to face with the new concept, habit, or skill; to explain; to demonstrate; to relate to learner experience

- Discussion--to clarify, to expand; to reinforce, to correct; to allow learner to verbalize, question, respond, and provide evidence of concept understanding

- Application--to apply, use, or verify concept; to build motor skills; to build habit; to develop attitudes through experiences

- Evaluation--to provide periodic closure; to modify concept; to expand divergent thinking; to summarize; to test (Teacher develops test or grading based on criterion-referenced measure.).

CRITERION-REFERENCED MEASURE--identifies the means of student evaluation and the minimum standard of performance accepted for mastery; should correspond with performance objective; teacher records achievement of task/competency on student's recording form. (Figure 1, #7)

SPECIAL NOTES--provides for instructor's notations concerning evaluation of the plan after it is implemented; may contain suggestions for future use of the plan.

Figure 1—Sample Task/Competency Framework Pages

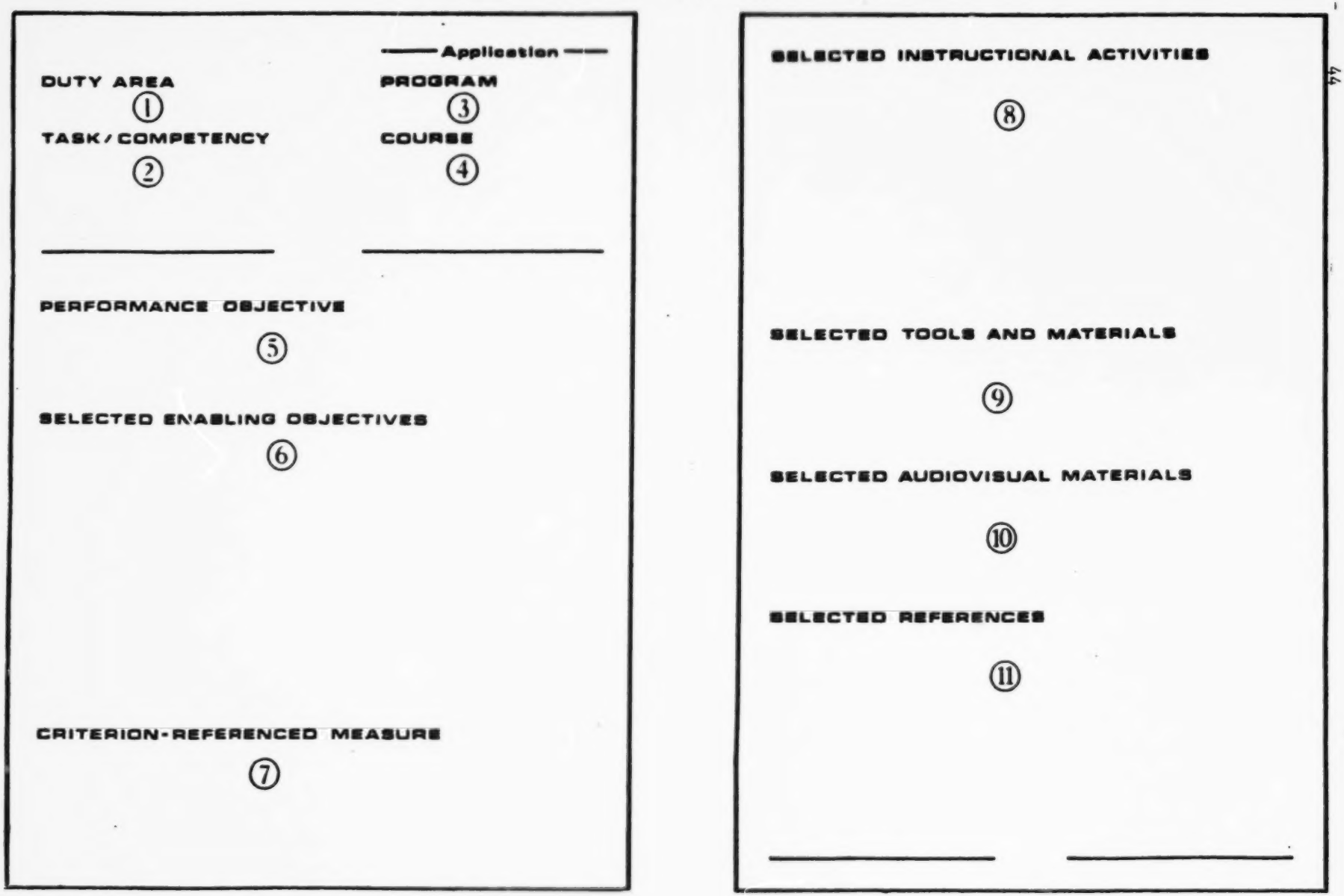


Figure 2
Sample Lesson Plan, Side 1

LESSON PLAN

by

Virginia Vocational Curriculum Center

Forehead and Scalp Wounds
Lesson Title

④ Health Aide II (8332)
EMT-A (8333)
Course

① Treating Wounds (Open and Closed)
Instructional Unit

② TASK/COMPETENCY: (knowledge, skills, or attitudes student gains from instruction)

Apply dressing and bandage to wound on forehead or scalp

⑤ PERFORMANCE OBJECTIVE: (expected conditions, performance, and criterion or standard)

Given sterile dressing and open triangular bandage, apply dressing and bandage to patient with open wound of forehead or scalp. Bandage must be sufficiently snug to hold dressing but not restrict circulation. A check for neck injury must be made and neck movement must be kept to a minimum.

⑨ TOOLS/MATERIALS:

Sterile dressings
Cravat
Overhead projector
Filmstrip projector

⑩ AUDIOVISUAL MATERIALS:

Slide set #7, Department of Transportation Slide Presentation. Emergency Care. Robert J. Brady Co.

⑪ REFERENCES:

Basic Training Course/Emergency Medical Technician: Instructor's Lesson Plans.
Emergency Care--Instructor's Lesson Plans, 3rd ed.
Emergency Medical Technician-A Instructional Resource Guide, pp. 90-91.
VTECS: Emergency Medical Technician, Performance Objective #34.

⑥ ⑧ STUDENT ASSIGNMENT(S):

1. Participate in class discussions.
2. Observe demonstrations.
3. Demonstrate required procedures (see Student Task Sheet).

2/84 VVCC

Figure 2
Sample Lesson Plan, Side 2

PRESENTATION: (Introduction, presentation, discussion, application, & evaluation)

⑤ I. Introduction
⑧
- A. Terminology
- B. Open wounds and control of external bleeding (review)
- C. Moving of victim with possible head or neck injury (review)
- D. Sterile technique (review)

II. Presentation
- A. Slide set
- B. Filmstrip
- C. Display
  1. Sterile dressings
  2. Open triangular bandage
- D. Demonstration
  1. Application of sterile dressing
  2. Application of bandage
  3. Checking for snugness and pressure

III. Discussion
- A. Injuries to the head and scalp
- B. Importance of controlling external bleeding of head wounds
- C. Precautions when treating forehead and scalp wounds
  1. Suspected skull fracture
  2. Suspected neck injury
  3. Maintenance of open airway
  4. Pressure and circulation
- D. Supplies needed

IV. Application
- A. Treatment of open wounds to forehead or scalp
- B. Control of external bleeding

V. Evaluation--student demonstration of CRM (below)

CRITERION REFERENCED MEASURE:

⑦ Apply dressing and bandage to open wound of forehead and scalp; check for neck injury. Bandage must be sufficiently snug to hold dressing but not restrict circulation, and patient's neck movement must be kept to a minimum.

SPECIAL NOTES: (Resource persons, if any; results and follow-up)

This lesson may be reviewed later during instruction on treatment of shock and procedures to maintain open airway.

LESSON PLAN

by

_____

_____

Lesson Title

_____ _____

Course Instructional Unit

TASK/COMPETENCY: (knowledge, skills, or attitudes student gains from instruction)	
PERFORMANCE OBJECTIVE: (expected conditions, performance, and criterion or standard)	
TOOLS/MATERIALS:	AUDIOVISUAL MATERIALS:
REFERENCES:	
STUDENT ASSIGNMENT(S):	

2/84 VVCC

PRESENTATION: (Introduction, presentation, discussion, application, & evaluation)

CRITERION REFERENCED MEASURE:

SPECIAL NOTES: (Resource persons, if any; results and follow-up)

STUDENT TASK SHEETS

The student task sheet is primarily intended for use as a handout and may include the following components, as displayed in the sample provided:

1) The task/competency statement

2) The performance objective developed to correspond to the task/competency

3) The enabling objectives which identify subtasks leading to mastery of the overall objective

4) The planned learning activity(ies) corresponding to each enabling objective

5) A statement of the criterion-referenced measure for the identified task/competency

6) Any necessary directions for completing one or more learning activities or tasks

7) A section for evaluation of the completed task(s) for recordkeeping and feedback purposes.

As a classroom management tool, the student task sheet may provide the following benefits to both the instructor and the student in competency-based education:

1) In the group instruction setting, duplication and distribution of the completed student task sheet prior to instruction allows the student to be informed of upcoming instructional plans and requirements, thereby fulfilling the CBE requirements of prior student notification of performance objective and criterion-referenced measure.

2) Once task/competencies for a given course have been identified, the instructor may use the student task sheet as a planning form, ensuring that each task is included and adequately planned for in instruction.

3) Prior completion of all components except the "Learning Activities" section provides an instrument for cooperative planning between the student and teacher. In this manner, the student task sheet is useful in selecting learning activities which are both tailored to the individual student and aimed at mastery of identified objectives and tasks.

4) The task instruction section of the form can be used to give the student detailed directions for completing any learning activity or hands-on task included in the performance objective.

5) Recording dates and evaluation comments corresponding to activities and the criterion-referenced measure renders the sheet a record-keeping device for the teacher or a means of feedback for the student.

STUDENT TASK SHEET

TASK/COMPETENCY: Apply dressing and bandage to wound on forehead or scalp.

PERFORMANCE OBJECTIVE: Given sterile dressing and open triangular bandage, apply dressing and bandage to patient with open wound of forehead or scalp. Bandage must be sufficiently snug to hold dressing but not restrict circulation. A check for neck injury must be made and neck movement must be kept to a minimum.

ENABLING OBJECTIVES:	LEARNING ACTIVITIES:	COMPLETED:
1. Define scalp injury, concussion, contusion, hematoma.	1. Listen to lecture, observe AVs, write definitions in notebook.	
2. Identify and assemble supplies needed to apply bandage and dressings.	2. Observe display, participate in class discussion.	
3. Demonstrate sterile technique for applying dressing.	3. Review, participate in class discussion, practice in class.	
4. Demonstrate raising patient's head and shoulders.	4. Observe demonstration; practice in class, keeping neck movement to a minimum.	
5. Apply sterile compress.	5. Observe demonstration, practice in class.	
6. Apply triangular bandage.	6. Observe demonstration, practice in class, teach another person how to perform procedure. (If necessary, refer to task instructions on reverse side of this sheet.)	
7. Test bandage for snugness.	7. Observe demonstration, practice in class.	
8. Inspect for circulation restriction or pressure.	8. Observe demonstration, practice in class.	
NOTE: When you are ready to demonstrate the procedure for treating open wounds of forehead or scalp, see the instructor for posttest.		

CRITERION-REFERENCED MEASURE:

Apply dressing and bandage to open wound of forehead and scalp; check for neck injury. Bandage must be sufficiently snug to hold dressing but not restrict circulation, and patient's neck movement must be kept to a minimum.

SAMPLE--Side 2

TASK INSTRUCTIONS:

PROCEDURE FOR TREATING OPEN WOUND OF FOREHEAD OR SCALP:

1. Do not attempt to cleanse the wound (may cause profuse bleeding or contaminate brain area if wound is deep or skull fractured.)
2. Raise victim's head and neck to control bleeding (raise as a unit; neck may be injured.)
3. Apply sterile dressing (do not use excessive pressure; bone may be fractured).
4. Once bleeding is controlled, apply bandage.

HOW TO FORM AND PLACE OPEN TRIANGULAR BANDAGE:

1. Fold 2-inch hem.
2. Place bandage on forehead, hem on the outside.
3. Carry ends around to back of head and cross.
4. Carry ends around to front of head.
5. Tie ends on front of head.
6. Tuck or pin bandage point in back of head.

STUDENT EVALUATION:

Completion Date_____

Grade_____

Comments:

STUDENT TASK SHEET

TASK/COMPETENCY:

PERFORMANCE OBJECTIVE:

ENABLING OBJECTIVES:	LEARNING ACTIVITIES:	COMPLETED:

CRITERION-REFERENCED MEASURE:

TASK INSTRUCTIONS:

STUDENT EVALUATION:

Completion Date_____

Grade_____

Comments:

LEARNING CONTRACTS

The learning contract is a management tool which allows the teacher and the individual student to agree, in advance, upon the components and outcomes of instruction. The typical learning contract contains the following elements:

1. The activities to be completed by the student
2. The time requirements for completion of designated activities
3. The expected quality of the student's performance
4. A final grade agreement
5. Signatures of the teacher and student.

The learning contract depicts the learning atmosphere as one that involves shared responsibility and mutual obligation on the part of the student and the teacher. In essence, the teacher agrees to provide the necessary conditions for completion of contracted activities (e.g., information, directions, materials, time) and to evaluate the student's performance according to predetermined criteria. In turn, the student agrees to perform the given activities within a specified period of time and to an expected standard of quality.

Use of the learning contract in competency-based instruction within vocational education classrooms offers the following benefits:

1. Learning contracts aid the teacher in organizing instruction so that all identified competencies are covered in the duration of the course. Individual contracts may be designed to incorporate related competencies so that time requirements for completion of all needed contracts coincides with the length of the course.

2. Learning contracts may involve the use of an unlimited variety of instructional methods, strategies, activities, materials, and grouping schemes.

3. Learning contracts accommodate instruction in the same content in classrooms of variable student academic skill levels and learning rates. For example, activities selected for slower learners may involve a greater degree of repetition or teacher direction; those selected for faster, more academically proficient students may involve increased learner independence and include additional enrichment projects.

4. Establishment of learning contracts provides a means for compliance with the competency-based education requirement that students be informed of instructional tasks and performance expectations prior to instruction.

5. Student motivation is enhanced by the student's involvement in contract preparation and awareness, prior to instruction, of what is expected of him or her.

LEARNING CONTRACT

Student:_____

Course:_____

I,_____,
(name of student)

agree to learn the competencies and complete the projects listed below during the six-week grading period of _____.
(dates)

Competencies/Projects:

_____

_____

_____

_____

_____

_____

_____

_____

I further agree that the quality of my completed work must comply with the standards identified for each competency.

I further agree that, upon satisfactory completion of the above, I will receive a final grade of _____ for the stated grading period.
(grade)

_____ _____
Student Date

_____ _____
Instructor Date

Self-Contained Learning Systems

Organization for effective instructional delivery in competency-based education may be achieved through the development of self-contained learning systems, such as those incorporating use of modules or learning activity packages (LAPs). A self-contained learning system for a given Health Occupations Education course might contain several packets, each of which is designed for instruction in a group of related competencies. By satisfactorily and successively proceeding through system packets, the student eventually is able to master all task/competencies identified for the course.

The term self-contained, as applied to learning systems, may have either of two meanings. Some systems, or packets within the system, contain all information, directions, and materials needed by the student for completion of system or packet activities. More often, however, packet directions refer the student to the use of additional materials outside of the packets (e.g., texts, audiovisual materials, tools and equipment). In the case of the latter, the system remains self-contained in that it includes the procedures for use of all materials, whether they are located within or outside the system itself.

The procedural steps for student completion of self-contained learning system packets are represented by the sequence chart included in this section. The following suggestions are offered for instructors using self-contained learning systems as a means of instructional delivery in the classroom:

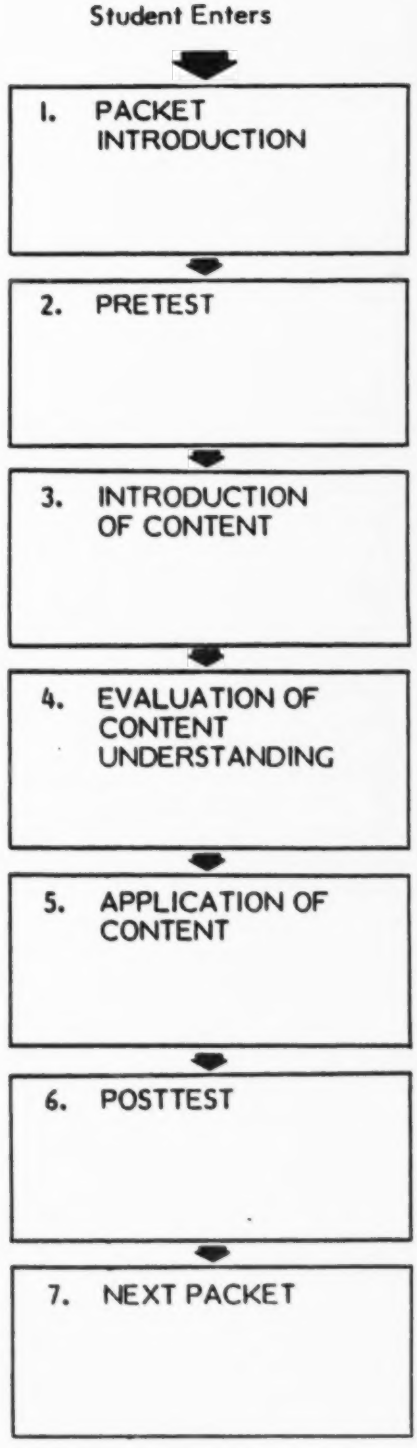
- Use or development of self-contained learning systems that include activities centered around the use of printed materials, requiring only that students receive information through reading and respond through writing, should be avoided. Such materials are most undesirable, both in terms of the limited variation across student activities and the obvious difficulty incurred by students who are not proficient readers or who learn

best by other means. The introduction of content (step 3 of the sequence chart) should involve the use of a variety of instructional methods and materials. Group activities and presentation methods should be incorporated for students involved in similar task/competency areas. Because of the amount and type of evaluation involved, means of assessment additional to the pencil-and-paper variety should be employed.

- Consistent assignment of self-contained learning system packets for individual and independent student completion should also be avoided. To increase socialization of learning, group activities should be incorporated into the introduction and application of packet content (steps 3 and 5 of the sequence chart). When packets are assigned for independent completion, the student's performance should be monitored frequently in order to ensure appropriate application and direction.

- Whenever assessment during or at the end of packet completion indicates that review or repetition of content or activities is needed (steps 4, 5, and 6 of sequence chart), it is recommended that this not simply involve duplication of the initial activity. Needed review may indicate that initial methods or materials were not effective in terms of the individual student. That student may achieve mastery of the same skills through the use of different activities or materials.

SELF-CONTAINED LEARNING SYSTEM SEQUENCE



The student carefully reviews the packet introduction, directions, enabling objectives, and performance objectives.

The student completes the packet pretest. If the established minimum score for mastery is obtained, the student proceeds to the next packet (Step 7); if not, the student proceeds to Step 3 within the same packet.

The instructional content of the packet is introduced to the student.

The student completes a response sheet which assesses his or her mastery of the content introduced in Step 3. If the established minimum score for mastery is obtained, the student proceeds to Step 5; if not, the student reviews content until mastered.

The student completes an activity designed to apply knowledge of content displayed in Step 4. Activities may include research assignments, project completion, or performance of "hands-on" tasks. When specified standards of performance are met, the student proceeds to Step 6.

The student completes the posttest. If the established minimum score for mastery is obtained, the student proceeds to the next packet; if not, Steps 3 through 5 are reviewed until the minimum score is obtained.

Steps 1 through 6 are continued for each successive packet until all system packets have been completed.

SECTION IV.

RECORDING SYSTEMS

Competency-based vocational education in Virginia requires a system for documenting competencies which have been achieved by each student. This information is essential to the student, teacher, and employer. For the student, it provides a record of successful progress through the vocational program. If the student should transfer to another school or enter the community college system, the record will assist in a smooth transition--eliminating the need to repeat skills and knowledge learned. Therefore, the competency record facilitates articulation between and among vocational programs at different levels of instruction. The teacher uses the competency record for evaluation and planning purposes in the course. Perhaps the most important use of a competency recording system is the provision of specific course information to students prior to and during instruction.

This section contains information on the characteristics of grading and recording systems for competency-based education. This information is followed by sample record forms for use in Health Occupations Education programs and courses.

GRADING

Local school boards establish the grading system for their school divisions; therefore, any proposed system in which competency attainment is converted to an overall grade must be based on local requirements. This must be underscored in considering principles of CBE grading.

It is generally agreed that grading each competency should go beyond the pass-fail stage and should include an indication of the degree of skill the student has demonstrated. In addition, the grade may be based on more than just the performance (psychomotor) level and include the knowledge (cognitive) and personal behavior (affective) areas. The time required by a student to reach a specific performance level should not be considered in rating a student.

Grades from any system will, of course, need to be converted to the conventional A, B, C, D, F system for reporting of grades. The grade for each individual competency must, though, be retained in a student file for use by employers, etc.

Passing (or failing) grades for a course can be accomplished in several ways, such as establishing a minimum number of competencies which must be mastered fully, focusing on the number of competencies mastered, or averaging of the scores on only those competencies actually mastered.

CHARACTERISTICS OF GRADING SYSTEMS FOR CBE

1. Each student should be graded on his or her own level of achievement and not in comparison to other students.
2. The minimum acceptable level of achievement should be based on the minimum entry level in the industry or trade.
3. The grading system should be based on nonpunitive strategies. Grades for competencies achieved should not be lowered by competencies not achieved.
4. The system should provide recognition for achievement beyond the minimum level.
5. In an articulated program, both secondary and post-secondary instructors must agree on the same criteria or standards to be achieved for each competency.
6. The evaluation system (letter grade, points, etc.) must be related to the competency criteria standard. For example, the terms excellent, good, average for the letter grades A, B, C should not be used.

7. The grading composition (e.g., percentage for attendance, attitude, etc.) must be made known to the student. It is suggested that three grades be given--one for performance, one for attendance/attitudes, and one for technical knowledge.

8. A minimum number of competencies should be equated to different letter grades. For example, a student receiving an A grade must have achieved 90 percent of the competencies for the occupation.

9. The time required for a student to master a competency should not be considered in rating a student, except as reflected in #8, above.

10. Letter grades should not be placed on competency sheets, but on the official transcript.

11. A point system should be used for all competency-based courses. This allows for a standard grade translation.

PSYCHOMOTOR GRADING

4, 3, 2, 1, 0 System

This system is the most widely used and is recommended since it easily converts to the A, B, C, D, F and decimal systems, A being 4 and F being 0. An average of 3.7 would be a grade of 94.25 percent, etc.

4--Highly proficient: The student can complete task quickly and accurately, can direct others in how to do task, and needs only normal supervision.

3--Competent: The student can complete all parts of the task, needs only a spot check of completed work, meets minimum entry level requirements, and needs job entry supervision.

2--Partially proficient: The student can complete most parts of the task, needs help only on hardest parts, may not meet all job-entry level requirements for speed and accuracy, and needs close supervision.

1--Extremely limited: The student can complete simple parts of task, needs to be told or shown how to do most of task, and needs extremely close supervision.

0--The student cannot perform any part of task at a level sufficient for participation in a work environment.

X--The student did not attempt the task.

5, 4, 3, 2, 1 System

5--The student can complete all parts of the task accurately and independently in less than the allotted time.

4--The student can complete all parts of the task with little assistance in the allotted time.

3--The student can complete most parts of the task accurately with some assistance.

2--The student can complete some parts of the task but needs help on most difficult parts.

1--The student's attempt was incomplete or incorrect.

X--The student did not attempt the task.

3, 2, 1, 0 System

3--The student can perform task/competency above job-entry level.

2--The student can perform task/competency at job-entry level.

1--The student can perform task/competency below job-entry level.

0--The student cannot perform task/competency.

X--The student did not attempt the task.

6, 5, 4, 3, 2, 1, 0 System

6--The student can perform this task without supervision or assistance and can lead others in performing it.

5--The student can perform this task without supervision or assistance, demonstrating initiative and adaptability to special problem situations.

4--The student can perform this task without supervision or assistance, showing proficiency in speed and quality.

3--The student can perform this task satisfactorily without assistance or supervision.

2--The student can perform this task satisfactorily but requires supervision and/or assistance.

1--The student can perform some parts of this task satisfactorily but requires instruction and supervision to perform entire task.

0--The student has some knowledge and limited experience but not sufficient for participation in a work environment.

GRADING SYSTEM INCLUDING AFFECTIVE, COGNITIVE, AND PSYCHOMOTOR ABILITIES

1. The cognitive grade should be determined from average of tests and quizzes.

2. The affective grade should be determined by considering the following on a 4, 3, 2, 1 or 5, 4, 3, 2, 1 or similar system:

   a. Use of correct safety procedures
   b. Good use of time
   c. Punctuality
   d. Ability to follow instructions
   e. Ability to work well with others
   f. Care of tools, equipment, and building
   g. Pride in workmanship
   h. Regular attendance.

3. The psychomotor grade should be determined from a 4, 3, 2, 1 or 5, 4, 3, 2, 1 or similar system.

4. The three grades should be averaged in the following way:

   Psychomotor grade x .5 + affective grade x .25 + cognitive grade x .25 = final grade.

CHARACTERISTICS OF RECORDING SYSTEMS FOR CBE

1. A common recording system should be used at both high school and community college levels.

2. The recording system must be an official school record and should be part of students' permanent files.

3. The recording system must contain a listing of all competencies in the occupational program.

4. A rating system should identify competencies achieved, designate the level of student performance, and provide an interpretation of the rating scale.

5. The record should include as a minimum:

   a. Occupational title
   b. Signatures of student, instructor, and school official
   c. Competency list.

INDIVIDUAL STUDENT RECORD

SAMPLES

The first sample form in this section is useful in recording individual student achievement in a given Health Occupations course.

The second and third sample forms provide for the recording of individual student achievement in both secondary and post-secondary programs.

Forms may be reproduced for actual use. Task/competency sheets in each form should be reproduced in sufficient quantity for the lsiting of all task/competencies identified for the given course.

V O C A T I O N A L E D U C A T I O N
C O M P E T E N C Y R E C O R D

Name of Student _____

School _____

Program Area: _____

Course Title: _____

CIP Code _____

VA Course No. _____

CERTIFICATION OF COMPETENCY

I hereby certify that the student named above has achieved the level of proficiency at the time of testing shown for each of the competencies on the attached list and has completed _____ hours of instruction with an attendance rate of _____ percent.

_____
Instructor's Signature

_____
Date

ADDITIONAL COMMENTS:

_____

_____

_____

_____

_____

_____
Student's Signature

_____
Date

INTERPRETATION OF SYMBOLS AND STUDENT SCORES

PERFORMANCE LEVEL

Proficiency 4:	HIGHLY PROFICIENT: The student can complete task quickly and accurately, can direct others in how to do the task, and needs normal supervision (94%-100%).
Proficiency 3:	COMPETENT: The student can do all parts of task, meets minimum local demands for speed and accuracy, and needs job entry supervision (87%-93%).
Proficiency 2:	PARTIALLY PROFICIENT: The student can do most parts of task, needs help only on hardest parts, may not meet local demands for speed and accuracy, and needs close supervision (79%-86%).
Proficiency 1:	EXTREMELY LIMITED: The student can do simple part of task, needs to be told/shown how to do most of the task, and needs extremely close supervision (70%-78%).
Proficiency 0:	The student's degree of skill is below minimally acceptable performance level (69% or below).

KNOWLEDGE LEVEL

Knowledge Level A:	OPERATING PROFICIENCY: The student can identify, measure, and use troubleshooting techniques to resolve task-related problems and can evaluate conditions and make proper decisions (94%-100%).
Knowledge Level B:	TECHNIQUES AND PRINCIPLES: The student can explain how and when task must be done and why each step is needed, can interpret written and oral instructions, and can analyze facts/principles (87%-93%).
Knowledge Level C:	PROCEDURES: The student can name most steps in task, needs help interpreting written instructions, and can explain basic facts and state general principles (79%-86%).
Knowledge Level D:	NOMENCLATURE: The student can identify parts and tools, and understand simple facts about task, and can identify related basic facts and terms (70%-78%).
Knowledge Level E:	The student's knowledge is below minimally acceptable standard (69% or below).

WORK HABITS AND ETHICS

Level A:	HIGHLY ACCEPTABLE: This is an area in which extraordinary strength is shown.
Level B:	VERY ACCEPTABLE: This is an area in which more than average strength is shown.
Level C:	ACCEPTABLE: This is an area in which average strength is shown.
Level D:	PARTIALLY ACCEPTABLE: This is an area in which some improvement is needed.
Level E:	NOT ACCEPTABLE: This is an area needing considerable improvement.

Page _____ of _____

Name _____ Program Area _____

Course Title _____

TASK NO.	TASK/COMPETENCY	PERFORMANCE					KNOWLEDGE					DATE
		4	3	2	1	0	a	b	c	d	e	

Page _____ of _____

Name _____ Program Area _____

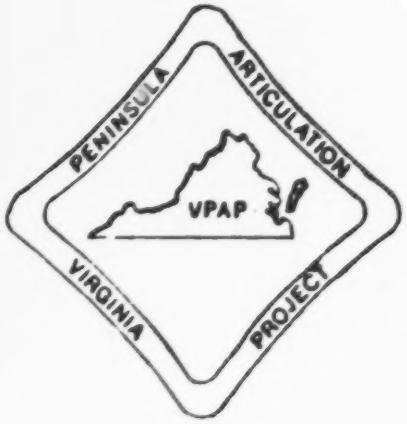
Course Title _____

NO.	EDUCATION/TECHNICAL KNOWLEDGE/ JOB PHYSICAL PROFILE Examples: 1. Uses instructions furnished in written or oral form 2. Able to use fingers, hands, arms to reach, handle,	PERFORMANCE					KNOWLEDGE				
		4	3	2	1	0	a	b	c	d	e

NO.	WORK HABITS AND ETHICS Examples: 1. Accepts constructive criticism 2. Demonstrates correct safety practices	WORK HABITS AND ETHICS				
		A	B	C	D	E

PENINSULA ARTICULATION PROJECT

COMPETENCY RECORD



NAME OF STUDENT_____ S.S. #_____

COURSE/OCCUPATION_____

THIS RECORD SHOWS THE COMPETENCIES DEMONSTRATED BY THE PERSON ABOVE ON THE DATE SPECIFIED IN THE DESIGNATED INSTRUCTIONAL AREA. THIS DOCUMENT WILL BECOME A PART OF THE STUDENT'S CUMMULATIVE RECORD AND WILL BE AVAILABLE TO SUBSEQUENT TRAINING INSTITUTIONS OR PROSPECTIVE EMPLOYERS. THE STUDENT WILL BE PROVIDED A COPY OF THIS COMPETENCY RECORD UPON TERMINATION OF HIS TRAINING.

RATING SCALE

4 - ABOVE CRITERION
3 - AT CRITERION
2 - NEEDS SUPERVISION
1 - CANNOT PERFORM TASK
\- TASK NOT ATTEMPTED
P - ACCOMPLISHED PRE-TEST
E - EQUIPMENT NOT AVAILABLE

SCHOOL(S) ATTENDED/EMPLOYER	PHONE #	DATES ATTENDED (FROM) (TO)	INSTRUCTOR'S NAME(S)	STATUS OF PROGRAM COMPLETION	HOURS

I CERTIFY THAT THIS RECORD OF MY COMPETENCIES IS A CORRECT AND ACCURATE DOCUMENT.

Student's Signature	Date	Instructor's Signature	Date	Principal/Supervisor Signature	Date

Directions: Date, initial, and rate the student's achievement in the appropriate column. Intermediate achievements should be recorded in pencil, with final achievements dated and initialed in ink.	SECONDARY			POST SECONDARY		
	DATE	RATING	INSTRUCTOR	DATE	RATING	INSTRUCTOR

COMPETENCY RECORD

NAME _____ SSN _____ SCHOOL(S) _____

SECONDARY PROGRAM _____ INSTRUCTOR _____

POSTSECONDARY PROGRAM _____ INSTRUCTOR _____

STUDENT'S SIGNATURE _____ DATE _____

GRADING SYSTEM*
4--Highly proficient
3--Competent
2--Partially proficient
1--Limited
0--Cannot perform
X--Task not attempted
*Detailed explanation on reverse side

PERSONAL CHARACTERISTICS	SECONDARY			POSTSECONDARY		
	GRADE	DATE	INITIALS	GRADE	DATE	INITIALS
Uses time well						
Is punctual						
Follows instructions						
Works well with others						
Takes care of tools and equipment						
Takes pride in work						
Attends regularly						
Is ambitious						
Communicates well with others						

TASK/COMPETENCIES	SECONDARY			POSTSECONDARY		
	GRADE	DATE	INITIALS	GRADE	DATE	INITIALS

GRADING SYSTEM

4--Highly proficient: The student can complete task quickly and accurately, can direct others in how to do task, and needs only normal supervision.

3--Competent: The student can do all parts of the task, needs only spot check of completed work, meets minimum entry-level requirements, and needs job entry supervision.

2--Partially proficient: The student can do most parts of the task, needs help only on hardest parts, may not meet all job entry-level requirements for speed and accuracy, and needs close supervision.

1--Limited: The student can do simple parts of task, needs to be told or shown how to do most of task, and needs extremely close supervision.

0--The student cannot perform any part of task at a level sufficient for participation in a work environment.

X--The student did not attempt the task.

STUDENT RELEASE

I, _____, hereby authorize the release of the information on this form for the purpose of awarding me credit for the competencies I have mastered.

_____
Signature

COMPETENCY RECORD

NAME _____ SSN _____ Page _____ of _____

TASK/COMPETENCIES	SECONDARY			POSTSECONDARY		
	GRADE	DATE	INITIALS	GRADE	DATE	INITIALS

CLASS PROGRESS CHART

SAMPLE

This form is useful to the individual course instructor in monitoring and evaluating total class progress. It is also useful in identifying students working in the same task/competency area for the purpose of conducting group activities. Additionally, the chart allows for ready selection of peer tutors by identifying each student's task completion record and proficiency level.

The second sheet of the form should be reproduced in sufficient quantity for the listing of all class members.

CLASS PROGRESS CHART

VOCATIONAL EDUCATION

COMPETENCY-BASED

STUDENT ASSESSMENT

Program Area: _____

Course Title: _____

CIP Code No. _____

VA Course No. _____

INTERPRETATION OF SYMBOLS AND STUDENT SCORES

Proficiency 4: HIGHLY PROFICIENT: The student can complete task quickly and accurately, can direct others in how to do the task, and needs normal supervision (94%-100%).

Proficiency 3: COMPETENT: The student can do all parts of task, meets minimum local demands for speed and accuracy, and needs job-entry supervision (87%-93%).

Proficiency 2: PARTIALLY PROFICIENT: The student can do most parts of task, needs help only on hardest parts, may not meet local demands for speed and accuracy, and needs close supervision (79%-86%).

Proficiency 1: EXTREMELY LIMITED: The student can do simple parts of task, and needs extremely close supervision (70%-78%).

Proficiency 0: The student's degree of skill is below minimally acceptable performance level (69% or below).

	DUTY/CONCEPT AREA:						
	TASKS						
PROGRAM AREA							
COURSE TITLE							
VA. COURSE NO.							
Students							
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							
21.							
22.							
23.							
24.							

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